

JUL 15 2008

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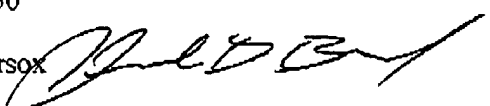
FACSIMILE TRANSMISSION COVER SHEET

DATE: July 15, 2008

TO: Mail Stop Amendment
U.S. Patent and Trademark Office
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

EXAMINER: Shubo ZHOU, Group Art Unit 1631

RE: U.S. Patent Application No. 10/672,937
For: MITOCHONDRIAL DNA AUTOSCORING SYSTEM
Our Ref.: 5010-350

FROM: Leonard D. Bowersox 

FAC. NO.: (571) 273-8300

NUMBER OF PAGES (INCLUDING THIS COVER SHEET): 12

Papers Filed Herewith: Transmittal Form (1 Page)
Amendment (10 Pages)

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Shirley Strain
Printed Name:


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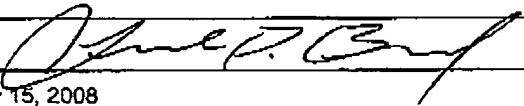
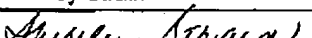
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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/672,937			
		Filing Date	September 26, 2003			
		First Named Inventor	Timothy B. STOCKWELL			
		Group Art Unit	1631			
		Examiner Name	Shubo ZHOU			
Total Number of Pages in This Submission	11	Attorney Docket Number	ABIOS.042A (5010-350)			
ENCLOSURES (check all that apply)						
<table border="0"> <tr> <td> <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Request For Reconsideration <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </td> <td> <input type="checkbox"/> Amended Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> After Allowance Communication to Group </td> <td> <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status <input type="checkbox"/> Acknowledgement Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below): <p align="center">Customer No. 35411</p> </td> </tr> </table>				<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Request For Reconsideration <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Amended Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status <input type="checkbox"/> Acknowledgement Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below): <p align="center">Customer No. 35411</p>
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Request For Reconsideration <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Amended Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status <input type="checkbox"/> Acknowledgement Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below): <p align="center">Customer No. 35411</p>				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm or Individual name	Leonard D. Bowersox, Esq.					
Signature						
Date	July 15, 2008					
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Type or printed name	Shirley Strain					
Signature		Date	July 15, 2008			

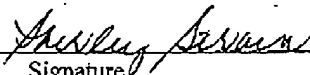
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Shirley Strain
Name (Print)


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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.	:	10/672,937	Confirmation No.:	9457
Applicants	:	Timothy B. STOCKWELL et al.		
Filed	:	September 26, 2003		
TC/A.U.	:	1631		
Examiner	:	Shubo ZHOU		
Attorney Docket No.	:	5010-350 (formerly ABIOS.042A)		
Customer No.:	:	35411		

AMENDMENT AND REPLY

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

This Amendment and Reply is in response to the Office Action mailed April 15, 2008, for which the Examiner has set a three-month period for response, thus making a response due on or before July 15, 2008.

Please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.